### STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

#### PLEASE PRINT

I. Name of Lobbyist(s) Kathy	Corey Fox				
II. Name of lobbyist's partnership, firm or corporation, if any:					
Bianco Professional Ass	ociation				
(Name of partnership					
18 Centre Street	Concord	NH	03301		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)		
(603 <u>225-7170</u> (Telephone)	(603) <u>226-0165</u> (Fax)	e-mail <u>kcorey</u> t	ox@biancopa.com		
III. This statement covers: (Choose reportable expense transactions wh			y file a separate report for		
All reportable transactions occurring in the months prior to the reporting date relative to the following client:					
(Full Name of	Client as it appears on the Lobb	yist Registration Form)			
All reportable transactions by the unrelated to any particular client.	lobbyist (including the lobby	ist's family), or the lobbying	g firm listed below which are		
IV. Date of Report April 26, 20 Reports cover: activity from date of the second		July 26, 2017 [] activity from 4/1/17 to 6/30/17			
October 25, activity from 7/1		January 31, 2018 [ ] activity from 10/1/17 to 12/31.	/17		
V. There have been no fees receif this box is checked, complete just the Concord, NH 03301.					
VI. Check if additional reports are	attached:				
If you have received fees or made	e expenditures, you must file	Addendum A- Fees and E	xpenses		
☐ If you have paid an honorarium of Expense Reimbursement	or reimbursed expenses, you	must file Addendum B– Re	port of Honorariums or		
☐ If you, your firm, or your family	has made political contributi	ons, you must file Addendu	m C- Political Contributions		
Sworn Statement/Affirmation by L I have read RSA 15, RSA 15-B, RSA and complete to the best of my know	14-C and RSA 664 and here	by swear or affirm that the f	Foregoing information is true		
(Signature of lobbyist)		(Dat	re)		
Kathy Corey Fox					
(Print Name of lobbyist)					



# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

III No			
III. Name of Client			Date10/19/2017
Political Contributions For each political contributions client/lobbyist and lobbyin			ter 664 paid on behalf of the
Full name of candidate:	Morse	Chuck	
_	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	350.00	Office Candidate is	s Seeking Senate
Full manner of any 1: 1-4a.	D'Allesandro	lou	
Full name of candidate: _	D'Allesandro (Last Name)	Lou (First Name)	(Middle Name/Initial)
Full name of candidate: _ Amount of contribution \$			(Middle Name/Initial)
Amount of contribution \$  If the contribution is an in-ki	(Last Name) 50.00 ind contribution, providentribution on the line abo	(First Name)	(Middle Name/Initial)  Is or services provided, and enter the actual cost is not know

- 1971	
(If more than three contributions were made, report addition	onal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 are is true and complete to the best of my knowledge.	nd hereby swear or affirm that the foregoing information ge and belief.
Lotte Con Lot	10/19/2017